Commonwealth of Virginia
Department of Professional and Occupational Regulation
Post Office Box 11066
Richmond, Virginia 23230-1066
(804) 367-0010
www.dpor.virginia.gov



Cemetery Board PERPETUAL CARE TRUST FUND TRUSTEE VERIFICATION

- **❖** THIS VERIFICATION MUST BE SUBMITTED WITH ALL CEMETERY COMPANY LICENSE APPLICATIONS.
- ❖ TRUSTEES THAT ARE NOT A VIRGINIA TRUST COMPANY OR TRUST SUBSIDIARY OR FEDERALLY INSURED BANK OR SAVINGS INSTITUTION DOING BUSINESS IN THE COMMONWEALTH OF VIRGINIA MUST SUBMIT A TRUSTEE APPROVAL APPLICATION TO THE VIRGINIA CEMETERY BOARD <u>PRIOR</u> TO THE TRUST BEING ESTABLISHED.

1.	Cemetery Company Name								
				Ente	er the c	ompa	ny nan	ne as i	t appears on the license.
2.	VA Cemetery Company License No.								_
3.	Name of Trustee								
4.	Trustee's Address								
	City, State, Zip Code								
5.	Trustee Contact Person								
6.	Trustee Contact Person's Title								
7.	Telephone & Facsimile Numbers	()	-		()	-	
			Tele	phone			Fac	simile	
8.	I certify that the cemetery company list	sted	in #1 h	nas establ	lished	an irr	evoca	ble tru	ust fund in the amount of at least
	\$50,000 for the perpetual care of its of	:eme	teries	in					
				Nan	ne of Ti	rust C	ompan	y, Trus	st Subsidiary, Bank or Savings Institution
	Trustee's Sign	nature	ature						Date